DOCUMENT RESUME

ED 218 860 EC 143 123

AUTHOR de Mezerville, Gaston; Monge, Gerardo
TITLE An Information Guide to Rehabilitation and Special Education in Costa Rica.
INSTITUTION Michigan State Univ., East Lansing. Univ. Center for International Rehabilitation.
SPONS AGENCY National Inst. of Handicapped Research (ED), Washington, DC.
PUB DATE Jul 81
NOTE 62p.

EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS *Disabilities; Elementary Secondary Education; *Foreign Countries; History; Medical Services; *Special Education; *Vocational Rehabilitation
IDENTIFIERS *Costa Rica

ABSTRACT

The report on rehabilitation and special education in Costa Rica covers the history of special services, with emphasis on medical, educational, and vocational efforts. Future priorities for each field are noted. A second section discusses the institutions that are the main national organizational forces in rehabiliation and special education, as well as internationally oriented programs and university affiliated services. The third section briefly summarizes programs serving specific types of disabilities: visual problems, speech and hearing problems, physical disabilities, mental retardation and emotional impairments, and learning disabilities. (CL)

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AN INFORMATION GUIDE TO REHABILITATION AND SPECIAL EDUCATION IN COSTA RICA

by

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July 1981

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UCIR ...about UCIR

Rehabilitation professionals around the world increasingly express a need to exchange information with colleagues in other countries. In the U.S., these professionals recognize the potential domestic benefit of programs, policies, methods and technological devices developed in other regions of the world, yet they often have little time to look internationally for information related to these concerns.

The Research, Information and Education/Training Divisions of UCIR work together to make international information available and useful to domestic rehabilitation. Information which is assessed as highly relevant, accurate and applicable to the field is disseminated through media, formal training of graduate students, and nonformal training such as workshops and seminars.

UCIR is especially interested in exchanging information with other countries regarding:

- Programs and services that help disabled people to live more independently
- Implementation of the new functional assessment scale of disability measurement developed by the World Health Organization
- Various roles for the participation of handicapped people in the rehabilitation process
- Behavioral characteristics and environments associated with individuals who successfully cope with disability
- Methods for overcoming the disincentives to employment which often result from benefit programs
- Barriers to the importation of technological devices
- International information exchange via computer conferencing
- Educational resources for the development of rehabilitation and special education curricula

Other aspects of the UCIR program include the award of graduate assistantships to U.S. and foreign students pursuing degrees in rehabilitation and related studies at Michigan State University, a course series with internships in international aspects of rehabilitation, a study/travel program with the University of Education, Heidelberg, and technical assistance to foreign universities in program development and faculty training.

UCIR is located at Michigan State University and is funded by the National Institute of Handicapped Research, U.S. Department of Education, Washington, D.C. The center welcomes comments and inquiries.

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Foreword

The present guide, the first of its kind. is aimed at providing the reader with an overview of the fields of rehabilitation and special education in Costa Rica. This document is a translation and condensation of the Spanish original, Qué Sucede? Manual Informativo Sobre Rehabilitación y Educación Especial en Costa Rica. That work was the product of the efforts of the Oficina del Convenio Internacional de Rehabilitacion (OCIR) and was jointly authored by Gaston de Mézerville, OCIR director, and Gerardo Monge Chavarría, director of the Instituto Andrea Jiménez, with the assistance of Ana Virginia Madrigal and Patricia Quirós. The sponsoring institutions were the Center for Training and Research of the Costa Rican Social Security Administration and the University Center for International Rehabilitation at Michigan State University.

Although the present text is based on a 1979 Spanish publication, the authors have tried to update the material with 1981 data. In condensing the original document we have attempted to retain the essential aspects representative of the rehabilitation and special education system.

Section I focuses on the history of rehabilitation and special education with emphasis on medical, educational, and vocational services.

Section II deals with the institutions that are the main organizational forces in rehabilitation and special education, namely, the National Council of Rehabilitation and Special Education and the Ministry of Education in Costa Rica, as well as the internationally oriented programs - the Oficina del Convenio Internacional de Rehabilitacion (OCIR) and the Partners Rehabilitation and Education Program (PREP). This section also focuses on the University of Costa Rica and the National University, which play pivotal roles in rehabilitation and special education training.

Section III briefly summarizes the programs offered by centers and institutions that serve the physically and mentally disabled. Information such as population served, referral practices, diagnostic services, funding, and other important features are highlighted.

The appendices provide the addresses of main institutions in charge of rehabilitation and special education, a list of associations working on behalf of the disabled, and other supplemental material.

Owen Daily
Linda Chadderdon
Editors

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Section I

What is Rehabilitation?

Medical Rehabilitation

Educational Rehabilitation (Special Education)

Vocational Rehabilitation

Social Rehabilitation

Section I

What is Rehabilitation?

People who may benefit from rehabilitation and special education services have been given many labels in Costa Rica. They have been called "deficientes" (deficient), "inválidos" (invalid), "subnormales" (abnormal), "incapacitados" (disabled), "minusválidos" (handicapped), "excepcionales" (exceptional), and so forth. The word "exceptional" is applied to above average as well as below average performances. Because it does not have a negative connotation, this label is preferred by many.

Disability in Costa Rica is viewed in terms of the World Health Organization (WHO) definition as "difficulties existing in carrying out one or more activities, which in accordance with the person's age or sex or social role are generally accepted as essential components for basic living skills, such as taking care of one's self, having relationships with other people, and carrying out economic activities."

The International Labor Organization (ILO) defines rehabilitation as "the application of a group of coordinated medical, educational, social, and vocational efforts, with the objective that the individual make use of his/her reduced capacities and become integrated into society as another useful member." This definition explicitly regards medical, educational, social, and vocational efforts as integral components of the rehabilitation process.

Rehabilitation services in Costa Rica have not grown uniformly in each of these component areas. In order to obtain a correct perspective, we will consider each discipline separately in terms of its origin, development, and status. It should also be noted that in this paper special education is thought of as the educational rehabilitation component within the total rehabilitation system.

Medical Rehabilitation

Medical rehabilitation is defined by the World Health Organization as "the initial stage of the rehabilitation process in which all efforts are directed toward obtaining the maximum restoration possible of the affected physical and mental capacities so as to allow the individual an autonomous and active existence."

Medical rehabilitation services in Costa Rica became noticeable around the time of the polio outbreak in 1954 when many hundreds of children were affected by the disease. The first service was the Casa Verde program, and Dr. Humberto Araya-Rojas, physiatrist, became very well known for his work in this area. He was sent to Mexico to receive specialized training in physical medicine and rehabilitation.

In 1955, the Patronato Nacional de Rehabilitación (National Rehabilitation Committee) was created. This steering committee served the General Directorate of Social Medical Aid and began its first of many years work towards the

establishment of a national rehabilitation center. Also around this period of time, Dr. Araya directed a study to determine the types of institutions already existing in the country that were in a position to deliver medical services in the area of physical disability.

Around 1960, the program at Casa Verde was moved to one of the main hospitals, San Juan de Dios. This hospital continues to play a major role in rehabilitation.

In 1966, the Hogar de Rehabilitacion de Santa Ana was created by law. This was the first institution to attend primarily to physically disabled children. Prior to this, rehabilitation had been delivered to children and adults in the same facilities. In the late 1960s, a campaign began in earnest to raise funds for the facilities of the national rehabilitation center earlier envisioned by the Patronato Nacional de Rehabilitacion. Five percent of the revenues from cigarette, beer, and liquor sales were allocated to the building of the future center. Construction began in 1973, and the center was inaugurated in 1976 with the name, Centro Nacional de Rehabilitación "Dr. Humberto Araya-Rojas." This center, as well as most other medical institutions, has since become part of the Costa Rican Social Security system.

Today, medical rehabilitation facilities are grouped under four main systems: 1) the Ministry of Health; 2) the Social Security system, under which most hospitals are grouped; 3) the National Insurance Company, which carries out some rehabilitation activities for people with work-related injuries or those who have private insurance; and 4) the Hogar de Rehabilitacion de Santa Ana, with services primarily for children. The Consejo Nacional de Rehabilitación y Educación Especial (CNREE - the National Council of Rehabilitation

and Special Education) has been charged to coordinate all institutional services on behalf of disabled people.

Medical attention can be obtained through any out-patient clinic or health center closest to the person's home, provided the center is part of the Costa Rican Social Security system. If necessary, a referral is made at this center to another one. Because specific diagnostic services are located at different centers, referral is common.

If the person is directly insured or is covered by some other family member's insurance or by state insurance, any necessary hospital or clinical attention will be provided through the Social Security hospital system. If the individual is not insured or does not have any type of health coverage, he/she goes directly to one of the centers within the Ministry of Health that provides these services or goes to a private doctor.

Children, whether they are insured or not, usually are referred to the Hospital Nacional de Niños (National Children's Hospital) where they are attended free of charge, provided they come with a referral.

Some priorities for the future of medical rehabilitation have been set forth by the National Council of Rehabilitation and Special Education. They are:

1. To integrate all services in the basic health programs so that the rural population can be better reached.
2. To create rehabilitation services in all the regional hospitals.
3. To create services that can help in the production and repair of prostheses and orthoses that would allow for more satisfactory output in terms of quantity and quality of various devices, such as wheelchairs,

canes, and other aids for the blind and physically disabled.

Educational Rehabilitation (Special Education)

In Costa Rica, special education has been defined as that branch of education that provides training to children and adolescents whose physical, mental, emotional, or social characteristics deviate from the norm. The purpose of this training is to contribute to the development of their capacities and allow them to be incorporated into society as useful individuals.

The oldest program for special education in Costa Rica was located at the Escuela Corazón de María; however, the main special education institution in the country was founded in 1940 by Prof. Fernando Centeno-Güell. The Centro Nacional de Educacion Especial "Fernando Centeno-Güell," as it is presently called, first focused on services for the mentally retarded child. Later, attention was extended to children with speech and hearing problems and visual impairments. Professor Centeno also became instrumental in the creation of two other special education facilities: the San Carlos and San Isidro schools, which are two to three hours by road from the capital city of San José.

The Basic Education Act was instituted in 1957. Part of this act asserted that children and adolescents whose characteristics deviated from the norm had a right to educational services. However, it wasn't until 1968 that a section directly involved with special education programs within the Ministry of Education was created to supervise special education activities as well as to promote the development of special education. By this time, about 14-15 different special education schools and rehabilitation centers were already operating.

In 1972 what had been just a few individuals working together on behalf of special education within the Ministry of Education became a department with Prof. Marlene Rodríguez as its director. Two areas of attention were formed: mental retardation and speech and hearing. By 1973, learning disabilities was added as another supervisory area, followed by a rapid growth of many self-contained classrooms and resource rooms in regular schools for children with mild learning disabilities.

Organizationally, the Ministry of Education dictates educational policies and administers and supervises all educational programs (public and private) offered directly to exceptional children or adolescents. The University of Costa Rica and the National University are the two main training centers for special education professionals. These institutions, together with the National Council of Rehabilitation and Special Education, are the main forces in education of exceptional individuals.

Special education services can be initiated in several ways, depending on whether the person is enrolled in school or not. If enrolled in school, the teacher requests a referral form through the district. If the person is not enrolled, a parent can contact the regional district office for a referral or go directly to the Department of Special Education at the Ministry of Education. In either case, the regional district reviews the information contained in the document and has it taken by the parent or someone from the district itself to the appropriate diagnostic center where a time and date are established for the student (or potential student) to be evaluated. The diagnostic centers usually have a multidisciplinary team that includes neurologists, psychologists, psychiatrists, and educational specialists, at least. Evaluative

information is sent from the diagnostic center back to the regional district for special education specialists to review and then refer the student to the appropriate educational center.

The National Council of Rehabilitation and Special Education has determined the following needs to be fulfilled during 1980-81:

1. To intensify all programs in the urban and rural areas that will insure the most effective integration of children and adolescents with various types of disabilities into regular school and vocational settings.
2. To evaluate and increase coordinative efforts between special education and vocational rehabilitation programs.
3. To intensify training efforts in different areas of special education using national and international resources.
4. To emphasize educational interventions for children with severe disabilities in the visual, muscular, emotional, and mental areas, and more specifically with autistic children.
5. To form a diagnostic unit that can be used to carry services to rural children. Among other functions, this team would determine the qualifications of teachers in the rural areas to administer various assessment tools, determine and provide any additional training needed, be responsible for the adaptation of assessment instruments that are used in these settings, and finally organize the units capable of conducting assessment in distant areas.

Vocational Rehabilitation

The International Labor Organization describes vocational or professional

rehabilitation as a "continued and coordinated process of rehabilitation which focuses upon the provision of resources oriented to training and guidance in professional matters, as well as selective placement so that an individual may secure and maintain an adequate employment."

In Costa Rica, vocational rehabilitation dates back to 1959 when Mrs. Soledad Murillo de Sanabria became part of the rehabilitation services staff at the San Juan de Dios Hospital. One year later, within this hospital, the Instituto de Orientación Vocacional de Rehabilitación (the Institute for Vocational Counseling in Rehabilitation) was established and training was initiated in three areas: radio techniques, woodwork, and industrial sewing. In 1962, the Ministry of Education began to provide economic support to this institute.

In 1969, the Industrias de Buena Voluntad (Goodwill Industries) was formed. The Institute for Vocational Counseling in Rehabilitation was moved from the hospital to another facility under the auspices of Goodwill Industries. This move was helped by the Methodist, Episcopal, and Catholic churches; the Ministries of Work, Health, and Education; the University of Costa Rica; and the Instituto Nacional de Aprendizaje (National Institute of Learning). Later, the Institute for Vocational Counseling in Rehabilitation became the Instituto de Rehabilitación Profesional (IRP - Institute for Professional Rehabilitation), one of the most extensive programs providing vocational training to disabled individuals in Costa Rica today. At present, the government is one of its major economic supporters.

In 1976, a department was established within the Ministry of Work and Social Welfare to act as a guiding force in the selective employment of

disabled people. The objective of the department was to seek competitive employment possibilities in industry and government settings for people with physical and mental limitations.

Additional training has been provided in the vocational area through the National Institute of Learning. This institute has had for a number of years the purpose of providing vocational training to people with limited formal training. The institute committed itself to train a total of 1,000 physically, mentally and socially disabled individuals a year since 1979.

Approximately nine main organizations supervise, provide or facilitate the provision of vocational rehabilitation services to handicapped persons. These agencies are: the Instituto de Rehabilitación Profesional (IRP), the Instituto Nacional de Aprendizaje (INA), the Departmento de Rehabilitacion Profesional del Ministerio de Trabajo (Vocational Rehabilitation Department of the Ministry of Work), the Beneficio Río Negro (Río Negro Company), the Taller Protegido de Acopane (Acopane's Sheltered Workshop), the Taller Protegido de Alajuela (Alajuela's Sheltered Workshop), Taller Protegido de Naranjo (Naranjo Sheltered Workshop), Taller Protegido de Turrialba (Turrialba Sheltered Workshop), and the National Council of Rehabilitation and Special Education

Any person needing diagnostic vocational services is referred to the Instituto de Rehabilitación Profesional (IRP). The other alternative is for the person to go to the Department of Vocational Rehabilitation within the Ministry of Work. Either place provides assessment to determine whether the person has work potential. If necessary, either institution will refer the person to other diagnostic centers, be they medical or educational, in order to define the problem more specifically.

If none of these steps fulfill the person's needs, he/she may be referred to other available resources, including the National Council of Rehabilitation and Special Education, which also offers limited counseling services.

Some future priorities for vocational rehabilitation established by the National Council of Rehabilitation and Special Education are:

1. To increase professional training efforts for individuals with mental and visual impairments, disabled workers, and for rural populations.
2. To develop assessment methods and techniques in the areas of vocational evaluation, counseling and training, as well as placement approaches adapted specifically to exceptional people living in Costa Rica.
3. To increase sheltered workshop settings, co-ops, and opportunities for employment in industry.
4. To train more people through a comprehensive rehabilitation master's program. A person trained in a program like this obtains skills, not only in a specialized area of rehabilitation, but can act as a multiplier capable of initiating and administrating rehabilitation programs in his/her community or country.
5. To train people in organization, production, and marketing in order to prepare them to direct co-op type organizations for exceptional people.
6. To prepare more people to work in the Department of Vocational Rehabilitation training program of the Ministry of Work.
7. To train people to direct and provide instruction in sheltered workshops.

8. To obtain more scholarships for Costa Rican students to study abroad in the area of vocational counseling and placement.
9. To study how the laws can be adapted to meet the needs of various types of disabled individuals in the area of work.
10. To provide technical assistance and financial help for organizing and improving employment services for people living in rural areas.

Social Rehabilitation

The World Health Organization states that "social rehabilitation is a part within the total rehabilitation process that is intended to reintegrate the disabled in society by helping him/her to adapt to family, social, and professional demands, while also reducing the economic and social barriers that could impede the person's readaptation."

While there are at least a dozen institutions or organizations in Costa Rica that impact on the social rehabilitation of socially maladjusted individuals, the overall feeling is that any of the organizations that provide direct rehabilitation services to handicapped individuals are competent to deal with the social component as a part of their intervention plan.

The National Council of Rehabilitation and Special Education considers the following areas to be of high priority in social rehabilitation for 1980-81:

1. To review the Social Security policies pertinent to death, accidents, and disabilities, and to reevaluate the disability criteria that affect benefits and the process of comprehensive rehabilitation.
2. To make some of the building code standards more responsive so that physical and architectural barriers will be removed.

3. To solve some of the transportation problems pertinent to severely disabled individuals, especially since this constitutes one of the primary obstacles to their integration in work and social activities.
4. To create substitute living environments or homes for physically and mentally disabled individuals who have been abandoned.

Section II

Government Institutions

National Council of Rehabilitation and Special Education

Ministry of Education: Special Education Department

International Programs

Oficina del Convenio Internacional de Rehabilitacion (OCIR)

Partners Rehabilitation and Education Program (PREP)

University Programs

Universidad de Costa Rica

Universidad Nacional

Government Institutions

National Council of Rehabilitation/Special Education (NCRSE)

In 1971, upon the recommendation and under the supervision of the International Labor Organization, the National Commission on Rehabilitation and Special Education was created. This commission's primary purpose was to act as a technical assistance and consultation body to the Ministry of Health in the area of special education and rehabilitation. Additionally, it was to carry out more specific objectives, such as increasing, promoting, and coordinating all the services (public and private) that relate to special education and rehabilitation. In 1973, the National Council of Rehabilitation and Special Education was created by law and the National Commission ceased to exist.

This National Rehabilitation/Special Education Council was originally created to guide general policy in rehabilitation and special education. It is associated with the Ministry of Public Health, Ministry of Education, Ministry of Work and Social Welfare, and specifically has to do with overseeing, planning, promoting, organizing, creating, and supervising programs and services in rehabilitation and special education.

The council is an autonomous body and is financed by a ½% municipal tax wherever there are special education services. Individuals from the following agencies are represented on the council: the Ministry of Work and Social Welfare, the Ministry of Public Education, the Ministry of Health, the Costa Rican Social Security System, the National Insurance Institute, the National Institute of Learning, and nongovernmental organizations such as universities, parent organizations, private industry, and the like.

Some of the current specific assignments of the council are:

1. Compiling a national registry on disabled individuals throughout the

country. This is considered the cornerstone for various types of activities that may be undertaken in the future in rehabilitation and special education. As of 1981, approximately 19,000 individuals have been classified.

2. Sponsoring a program on the detection of hearing problems. This program was initiated by the council and has now been transferred to the Ministry of Health for its development.
3. Providing counseling services. The counseling service is designed to help parents in the resolution of various types of problems in rehabilitation and special education. Legally constituted associations for the disabled can also benefit from this service.
4. Gathering pertinent documents and information in rehabilitation and special education. The main purpose of this activity is to identify and classify bibliographic sources and audio-visual aids in rehabilitation and special education so that more effective aid can be offered individuals in their work.
5. Promoting better facilities or removal of architectural barriers. The National Rehabilitation/Special Education Council, with assistance from the Ministry of Health and the School of Architecture at the University of Costa Rica, has designed a national plan to eliminate architectural barriers.
6. Assisting in legal matters. Through this activity, families, disabled individuals, and institutions serving the handicapped may obtain certain types of legal information to increase their awareness about the types of services or actions available when certain needs arise.

7. Enhancing employment opportunities. This activity is aimed at insuring integration of the disabled in economic activities throughout the country. Special strategies to generate employment are being used. One such strategy is called selective employment and is jointly implemented with the Ministry of Work. Employment opportunities are also fostered through sheltered workshops and cooperatives. Legislation to enhance employment opportunities is studied as well.
8. Educating people and communities. Within this area, two projects are considered. The first focuses on training, through courses and seminars, to provide rehabilitation personnel with the skills to meet various types of rehabilitation needs in their communities. This program is already supported by the University of Costa Rica, the National Institute of Learning, and other institutions that provide training services. The second project focuses on community education and is directed to all sectors of the country. The project's purpose is to inform people about disability, its causes and prevention, and to make people better aware of community resources.
9. Establishing professional rehabilitation services for blind individuals. This project, already in process, is a coordinated effort of several organizations, including the National Institute of Learning, the Ministry of Education, the Ministry of Work and Social Welfare, and the Association of Goodwill Industries. The project focuses on the prevention of blindness and is promoted, programmed, and coordinated by the National Rehabilitation and Special Education Council. Its actual execution is under the Ministry of Health, with the cooperation of the

Costa Rican Social Security Council, the National Insurance Institute and other groups.

10. Establishing a master's program in comprehensive rehabilitation. This program is to be carried out in conjunction with the University of Costa Rica. The purpose is to offer a master's degree in comprehensive rehabilitation to Costa Rican and other Latin American professionals who have been working in medical, educational, social, vocational, or other related areas.

Ministry of Education: Department of Special Education

The Department of Special Education in the Ministry of Education is composed of three units - one responsible for services offered to mentally retarded, physically disabled and visually impaired individuals; one responsible for programs to individuals with speech and hearing difficulties; and one responsible for individuals with learning disabilities, emotional impairment, psychosocial problems, and health problems.

Services are provided through various settings. Most children receive special education services through the 135 self-contained classrooms and 16 resource rooms within regular schools of the public school system. The programs are directed towards training in the basic skills and personal/social areas. Adolescents are often placed in separate classrooms in secondary school settings to learn vocationally-related skills. Many of these individuals are borderline retarded, hearing impaired, or learning disabled. Individuals with more severe disabilities receive special education services in institutions or in special education schools. Many children, especially those with hearing or mental impairments, begin their education in these settings then move on to self-contained classrooms. Very young children with speech or physical problems can receive services on a limited basis from clinics where their parents will take them for several hours a week.

The Special Education Department at the Ministry of Education coordinates diagnostic services provided by diagnostic teams within several of the hospitals in San José.

A country-wide reorganization of the educational administrative system is underway. It is expected that this will provide the necessary ingredients for

each region within the country to be more in control of local programs in special education.

This reorganization takes into account the physical and administrative elements that may contribute to the proper development of local needs, interests, and aspirations. Seven regions - Central, Oriental, Occidental, Chorotega, Brunca, Atlantica and Norte - are represented and each is subdivided into sub-regions and micro-regions (see chart and map, Appendix A).

Brief Description of the Components of Each Special Education Unit

Unit I: Mental retardation. In Costa Rica the disabled are classified into two main categories, educable (including borderline) and trainable (including the severe).

Educational intervention is organized into five phases. The first phase concerns children between ages 0-5. This early stimulation period, as it is called, focuses on fine and gross motor coordination activities and language and social development. The second phase focuses on children between ages 5-9. Here the emphasis is on academic readiness skills and social skills necessary for learning and other interactions. Phase three is for individuals age 9-14 and is termed elementary. Students are exposed to an elementary curriculum based on their various potentials. Phase four, for individuals age 14-18, emphasizes prevocational activities, while phase five focuses on practical and very basic training for severely disabled individuals. This latter phase is not restricted by age.

Physical disabilities. People with severe physical disabilities usually attend schools especially oriented to this population, and the types of

educational interventions are based upon the student's physical and mental limitations (if any).

Visually impaired. Traditionally the visually impaired have been served in an institutional setting. More recently, many have been integrated in regular schools. Their curriculum has traditionally emphasized that which would be taught in the regular schools, with additional components like mobility and orientation, braille and so forth.

Unit II: Speech and hearing. The most favored approach used with hearing impaired children is the oral one, although total communication is becoming more popular. Programs are conducted within special education schools or in regular schools through self-contained classrooms. People between ages 0-18 are served. Diagnostic services are provided by the program for the deaf at the Cartago school and at the Centro Nacional de Educacion Especial "Fernando Centeno Güell." Additional diagnostic centers function within some of the hospitals.

Education for the speech and hearing impaired population is organized around four stages. Early stimulation for ages 0-4 emphasizes oral language development through use of facial and lip cues, babbling exercises, and pre-articulatory and hearing exercises. Perceptual training is emphasized extensively.

Careful planning is carried out in the second stage (kindergarten). It is expected that by the end of this period, children will have a strong basis for lip and facial communication skills, general language, and oral language skills obtained through different types of group discussions, dramatizations, and plays. The third stage is the primary education level, targeted at providing basic skills that children use to learn. The final stage is directed toward

prevocational training activities. Language therapy is offered to all children from the time of their entry to the program.

Unit III: Learning disabilities. These programs are offered in the regular school system through self-contained classrooms typically known as resource rooms. The student population is made up of individuals from first through sixth grade at the elementary level.

Emotional impairment. Children with emotional problems are helped in adapting emotionally and socially to their school and environment. They might go to the neuropsychiatric school or the psychiatric hospital for help.

Psychosocial difficulties. Children and adolescents attending these programs usually have a history of delinquency or severe behavioral problems. There are two institutions serving this population: the Escuela Hogar Infantil, and Escuela Corazón de María.

Health problems. The focus of this program is for children who have been hospitalized for extended periods of time and require ongoing activities to stimulate their physical, academic and emotional growth.

International Programs

Oficina del Convenio Internacional de Rehabilitacion (OCIR)

The Oficina del Convenio Internacional de Rehabilitacion (OCIR) is the result of a program agreement established in 1976 between the University Center for International Rehabilitation (UCIR) at Michigan State University and the Center for Training and Research of the Costa Rican Social Security Administration.

The purpose of this program is to promote the field of rehabilitation and special education in Costa Rica, as well as internationally, from a comprehensive perspective that includes the medical, educational, vocational and social aspects of the total rehabilitation process.

OCIR is organized for this undertaking into the following four units: Administration, Information, Training and Research.

The general objectives for the 1980-85 period are:

1. To promote international cooperation conducive to the enhancement of the rehabilitation field throughout the world.

2. To serve as a link between domestic institutions and international organizations working on behalf of disabled persons. This general objective is achieved in a two-fold manner:

   a. By retrieving and disseminating domestically useful information about international rehabilitation.

   b. By retrieving and disseminating internationally useful information about Costa Rican rehabilitation.

3. To offer consultation to Costa Rican rehabilitation institutions regarding specific projects, as well as to promote an effective inter-institutional cooperative partnership in rehabilitation.

4. To promote the formal and nonformal training of Costa Rican rehabilitation students and professionals through their enrollment in an overseas program and/or by receiving training in Costa Rica given by visiting rehabilitation professionals.

5. To represent the Center for Training and Research of the Costa Rican Social Security Administration, as well as the University Center for International Rehabilitation (UCIR-MSU) at national or international rehabilitation seminars and congresses.

Partners Rehabilitation and Education Program (PREP)

The Partners Rehabilitation and Education Program has been active in rehabilitation partnerships between specific U.S. states and Latin American countries since the 1960s. For about 15 years, the partnership between Oregon and Costa Rica has promoted an exchange of Costa Rican and Oregon's rehabilitation and special education professionals. This exchange has resulted in many concrete achievements.

A new stage started in 1980 with the establishment of the Partners Appropriate Technology for the Handicapped program (PATH) in the following countries and their partner states: Costa Rica and Oregon, Jamaica and Western New York, Ecuador and Idaho, Brazil (Minas Gerais) and Colorado, and Uruguay and Minnesota. The PATH-Costa Rica project aims to increase independent living and vocational skills of selected populations of handicapped people and their families in Costa Rica.

The expected outcomes for the PATH-Costa Rica project for the 1980-81 period are:

1. To participate in an inter-American exchange of information on low-cost, community-based approaches and strategies for disability prevention, special education and rehabilitation with colleagues in Ecuador, Jamaica, Uruguay, Brazil, and the USA.

2. To acquire, adapt, and/or develop appropriate practical materials, information, and low-cost equipment and devices relevant to the identified needs of handicapped people in Costa Rica.

3. To increase the availability, utilization, and dissemination at the community level of the resources identified in item 2.

4. To facilitate the establishment and growth of self-help groups.

5. To promote the development of parents' and community groups on behalf of the disabled.

6. To provide in-service training to vocational skills instructors about vocational development and potential of handicapped people.

7. To offer orientation to leaders and professionals in rural towns about rehabilitation strategies in their communities.

University Programs

University of Costa Rica

In 1974, the University of Costa Rica first offered a bachelor's degree to teachers in the area of special education. Primary emphasis was in mental retardation, speech and hearing problems, and learning disabilities. Shortly before 1974, an emergency program had been offered to 41 professionals in problems related to language caused by hearing and speech impairment.

To be admitted to a degree program, the student must first pass an entry examination to the university, successfully complete a personality inventory, and be interviewed by the appropriate individuals in the department. As would be expected, most of the first graduates in the area of special education worked in schools in San José and adjacent provinces (Alajuela, Heredia, and Cartago). By 1977, a plan preparing teachers to work in the rural areas had begun. This plan was sponsored by the University of Costa Rica, the Ministry of Education, the National Rehabilitation and Special Education Council, as well as the student's funds. In 1978, a program focusing on children with emotional and visual impairments was initiated.

The special education department staff is presently made up of approximately 17 professors, most of whom are former graduates of the program working on a part-time basis. Also, a significant percentage of the staff are individuals with a master's training from foreign universities.

National University

Around the time the University of Costa Rica began its efforts in special education, the National University initiated a two-year program to train individuals as resource persons for program development in the area of learning

disabilities. This program was also supported by the Ministry of Education.

By 1977, the first bachelor's degree program in education with an emphasis on learning disabilities began at the National University. Two years later, 30 students were graduated. To attend this program, one must have worked at least two years at the elementary level in the regular school system. People enrolled in this program usually are presently working as teachers. Their ultimate assignment upon graduation is to become either a classroom teacher or to serve as resource personnel.

About nine staff members are responsible for the training; most of them work on a part-time basis. Together with the Ministry of Education, these professionals are involved in a community extension aid service, which is diagnostic in nature. They travel to rural areas, conduct a series of screening tests, and make recommendations to teachers and parents about how to better serve certain children.

Section III

Centers Providing Services to the Physically and Mentally Disabled

Visual Problems

Speech and Hearing Problems

Physical Disabilities

Mental Retardation and Emotional Impairments

Learning Disabilities

Services for the Disabled in Costa Rica

The last section of this document focuses on service providing institutions for the disabled in Costa Rica. Five disability areas will be presented: visual, speech and hearing, physical, mental impairments, and learning disabilities. Each will be discussed from the medical, education, and vocational perspective, and comments will be made about the nature of the services rendered, type of population served, source of funding, and affiliation with other institutions.

Visual Problems

Medical Interventions

Unidad de Oftalmología Sanitaria

This state-funded institution is responsible for studying, coordinating, and planning various types of measures related to prevention, detection, and treatment programs. In addition to funding received from the state government, it also functions with help from private institutions, citizens, and voluntary organizations. Its functions are coordinated with the Ministry of Health, the National Council of Rehabilitation and Special Education, and others. While individuals of all ages are attended to, the main thrust is on children between the ages of 0-12. Eighty percent of the time is spent with individuals within this age range, while another twenty percent is directed to various types of causes of visual impairments, chiefly glaucoma, diabetes, and work-related injury in adults.

Educational Interventions

Centro Nacional de Educación Especial "Fernando Centeno-Güell"

The department of visual impairment of the Fernando Centeno-Güell school is the main source of educational services for children with visual problems. It is funded primarily through the Ministry of Education, but receives minor support from private citizens and through parent-supported activities. Approximately 120 children and young adolescents who are partially or totally blind are served. A significant number of the students live in the center and are from distant areas. Most of the training is geared to the academic and socio-personal development of the students with some minor emphasis on the development of prevocational skills. The teaching staff is made up of about 21 persons. Admission is initiated through referral from other institutions or from the parent, teacher, or any other concerned individual. Many students attend a regular school in the day time, depending on their needs.

Vocational Interventions

There really aren't any centers that attend exclusively to people with visual disability, but there are those that will admit a limited number of visually-impaired individuals if their entry skills are adequate. These organizations are the Instituto de Rehabilitacion Profesional (IRP), the Instituto Nacional de Aprendizaje (INA), and the Department of Vocational Rehabilitation of the Ministry of Work.

Speech and Hearing Problems

Medical Interventions

Two programs offer medical services in the area of speech and hearing. One of these is the Clínica de Labio y Paladar Hendido (Cleft Palate Clinic); the other is the Centro Nacional de Detección de la Sordera (the National Center

for Detection of Deafness).

The Cleft Palate Clinic operates within the Children's National Hospital. Approximately 32 children are served, ranging in age from 3 to adolescence. Major attention is directed to surgery that will provide a basis for eating and speech mechanisms to develop and will provide cosmetic improvement. Five individuals make up the staff - two specialized dentists, a speech therapist, a social worker, and a dental assistant. However, the patient has access to other professionals working for the hospital. Patients may be referred to the clinic by other hospitals or clinics or taken directly to the clinic by a parent. The clinic is financed by the Costa Rican Social Security Administration and the Ministry of Education.

The second organization, the National Center for Detection of Deafness was initiated in 1975 by the National Council of Rehabilitation and Special Education. Since then more than 50,000 audiometric examinations have been performed on children, adolescents, and adults. The primary function of the center is to detect as early as possible in childhood any anomoly that may relate to hearing loss. It operates as one of the support services to the Ministry of Health. Team visits are conducted to schools and to various centers, such as work places with excessive noise. Referrals may come from the Special Education Department of the Ministry of Education, the National Council of Rehabilitation and Special Education, and others. If, during the first test, a person is found to experience problems, the person receives further testing at the center and is treated or referred, depending on the nature of the difficulty. Six technicians make up the staff; five are technical assistants, and one is a medical doctor.

Educational Interventions

Several different centers provide educational services for speech and hearing impaired persons. All of these centers are largely supported by the Ministry of Education but also receive minor support from parents and private organizations.

The Department of Speech and Hearing Impairments at the Fernando Centeno-Güell school provides services for approximately 140 children ranging in age from 1½-15. They are attended by some 22 teachers, including speech therapists and audiometricians. Like most state-supported institutions, services are free.

The second center is the Escuela de Niños Sordos de Cartago in Cartago (30 minutes east of San Jose). This school serves approximately 62 children and adolescents, and eight teachers are in charge of the whole operation.

A third institution, the Centro de Enseñanza Especial de Audición y Lenguaje de Turrialba (two hours by highway from San José), is in Turrialba in the province of Limón. This center serves about 45 children ranging from 1-6 years of age. The staff is made up of about six teachers. It is also supported by the Ministry of Education.

Six other special education schools throughout the country provide services for the speech and hearing impaired serving a population of approximately 20-50 students each (see Appendix C).

In addition to these centers, many children and adolescents are served in regular elementary and high schools in self-contained classrooms. The record indicates that 35 such classrooms exist throughout the country. Also, a number of private schools contract their own language therapists.

Vocational Interventions

In addition to the three major service providers in the vocational area - IRP, INA, and the Department of Vocational Rehabilitation of the Ministry of Work - the Beneficio Río Negro also represents a source of employment for people with speech and hearing difficulties.

Physical Disabilities

Medical Interventions

Individuals with physical disabilities may receive medical attention at three different centers: the Centro Nacional de Rehabilitación "Dr. Humberto Araya," the Servicio de Fisio-Kinesiterapia of the San Juan de Dios Hospital, and the Casa de Salud of the Instituto Nacional de Seguros.

The Dr. Humberto Araya Center provides attention in the areas of physical and occupational therapy, orthopedics, neurology, general medicine, odontology, plastic surgery, and physical medicine, among others. It will supply the prosthetic and orthotic devices needed by the patient, as well as any social work needed prior to and after intervention. The center is manned by some 28 medical doctors and 133 paramedics. It is one of the biggest and most modern centers and operates within a few hundred feet of the Hospital Mexico. It provides both in and out-patient services. It is funded, like most hospitals in the country (excluding private institutions), by the Costa Rican Social Security Administration and by a percentage of the tax levied on cigarette and liquor sales. Patients must be referred by other medical persons or institutions. A charge may be levied on the patient, depending on his/her financial situation. This center also serves as a training ground for medical students and

paramedical personnel for all the hospitals in the country.

The Servicio de Fisio-Kinesiterapia of the San Juan de Dios hospital is a program that has existed since 1954 at the time of the polio outbreak. Approximately 2,500 out-patients are attended monthly, while approximately 300 people are interns. Individuals of all ages are represented.

Orthopedic devices utilized by the patients are constructed at the center. Seventy-three percent of the people employed in the construction of these devices are disabled people themselves. Twelve medical specialists and 18 paramedics run the entire operation. Physical and occupational therapy, as well as surgery and social-psychological services are provided. This center is supported by the Costa Rican Social Security administration. All referrals must come directly from medical institutions or medical personnel.

The Casa de Salud is administratively part of the Instituto Nacional de Seguros (National Insurance Institute). This institute is a state monopoly for work injury, fire, automobile, and other types of private and public insurance coverage. The Casa de Salud serves people covered by the National Insurance Institute who may need physical rehabilitation, either around the clock or periodically. The services provided include physical and occupational therapy, orthopedics, neurology, psychiatry, etc.

Certain types of medical attention may be given to people in their homes, and some individuals may receive treatment through contracted services of other clinics or private medical centers. Approximately 500 people are attended in this manner on a daily basis.

Regional centers also operate in various parts of the country. Five medical specialists and 57 paramedics run the program. The service is paid for by the National Insurance Institute, and patients are referred by any of

the hospitals.

Educational Interventions

In the educational area, two centers provide most of the services: the Hogar de Rehabilitación de Santa Ana and the Escuela de Rehabilitación. The Hogar de Rehabilitación de Santa Ana, in existence since 1962, serves about 50 children between the ages of 1-12. These children come primarily from rural areas; many are also homeless. The center offers physical and occupational therapy as well as kindergarten, primary education, and special education for those children with mental retardation. Seven teachers, a physical therapist, a nurse, a visiting medical doctor, and a dentist make up the staff.

Children are referred by hospitals. The center is financed primarily by the state, revenues from a special rehabilitation stamp, and revenues from a voluntary organization. Transportation costs and food are free to the student.

The Escuela de Rehabilitación, also located in San José, has been in operation since 1973 and began as a rehabilitation unit at the Hospital San Juan de Dios. It is now an independent organization and serves about 82 children ranging from 1-8 years of age. Approximately eight teachers, a language therapist, and a physical therapist make up the staff. The school provides the necessary transportation, except for those children who attend on an hourly basis. Referral is accepted from any institution or person providing there is clear evidence of physical impairment to justify the services.

Vocational Interventions

In the vocational area three centers are considered. The Instituto de Rehabilitación Profesional (IRP), the Instituto Nacional de Aprendizaje (INA)

and the Vocational Rehabilitation Department of the Ministry of Work.

The IRP has been so called since the year 1977. Previous to this date it was called Industrias de Buena Voluntad (Goodwill Industries).

The purpose of the program is to provide people with mental and physical disabilities an opportunity to become more productive members of society, both in social and economic terms. It serves a population of about 100-120 students whose ages range from 16-45 years of age. It is financed by the government and the Association of Goodwill Industries. Separate training agreements exist with the Instituto Nacional de Seguros (INS) and the Instituto Nacional de Aprendizaje (INA).

The staff is made up of 12 instructors, two social workers, a placement specialist, a psychologist, a counselor, a nurse, and a half-time medical doctor.

Trainees must be able to read, write, and have basic skills in arithmetic. All the training is provided free of charge. Students, however, must provide a basic sum for their food and transportation. Individuals unable to meet this cost are provided scholarships either through IRP funds or through various governmental support organizations. Trainees are instructed in welding, electronics, industrial sewing, etc. A more general area of training prepares people to enter any of three other areas (industrial machines, home machines and upholstery) or gets them ready for working in factories. The IRP works in cooperation with the Instituto Nacional de Aprendizaje (INA), the Institute Nacional de Seguros (INS), the National Council of Rehabilitation and Special Education, the Ministry of Work, and others.

Another center offering extensive vocational services is the Instituto Nacional de Aprendizaje (INA). Its founding was influenced by the Declaration

of Disabled Individual's Rights and upon Recommendation 150 of the International Labor Organization relative to professional orientation and training as a means to the development of human resources.

While disabled individuals represent a minority of the individuals served from 1971-78, the INA has provided technical and financial assistance to various institutions serving the disabled, and professional training has been provided to more than 226 people of both sexes with physical, mental, and social disabilities. It has co-sponsored six different training sessions directed at helping medical, psychological, social, and counseling professionals to work more effectively with disabled persons. This training was extended to other countries in Latin America also.

In 1979, the INA together with a government agency directed a project to train individuals who were disabled, alcoholics, inmates, prostitutes, or from other groups. Their initial goal was to train approximately 1,000 people. They were able to conduct a total of 96 courses; 54 of these were in the agricultural area, 26 were relevant to industry and commerce, and 16 were in the construction area. In another project, together with the National University, 15 professionals were certified to provide support in vocational rehabilitation. Of the people trained in this 1979 project, at least 400 were adolescents between the ages of 15-18 who had a physical, mental or social disability.

The INA receives support from other institutions such as the Ministry of Justice and Education, the Costa Rican Social Security Administration, the National Council of Rehabilitation and Special Education, the Instituto de Rehabilitación Profesional (IRP), and the National Institute on Alcoholism.

Various other projects are contemplated in the area of vocational training for the year 1980. Among these are plans to provide diagnostic information and assist in selecting appropriate work activity for approximately 1,200 handicapped persons; to provide additional primary and secondary training to these individuals; to conduct a follow-up study on the 1979 project; and to institutionalize a national system of comprehensive rehabilitation.

The last of these service providers is the Vocational and Professional Rehabilitation Department of the Ministry of Work. It has existed since 1977 and started with one employee. Now there are seven persons who work at evaluation, orientation, professional training, and finding jobs for individuals with physical, mental, and social disabilities.

An average of about 25 people each month are placed in various types of work. The program is entirely sponsored by the government and works with any of the institutions within the country that deal with vocational rehabilitation and work training.

Mental Retardation and Emotional Impairments

Medical Interventions

The major program serving individuals with mental retardation and emotional impairment is the Hospital Nacional Siquiátrico (National Psychiatric Hospital). It has been in existence for over a 100 years. The population served includes women, men, and children of whom approximately 1,000 are interned. A few patients who are homeless live in group homes close to the hospital; they spend the day at the hospital.

This program is supported financially through the Costa Rican Social

Security Administration. The staff consists of 45 individuals who are medical doctors or psychiatrists and approximately 338 paramedics.

In addition to the medical attention received by the patients, training is provided in carpentry, assembling things, making things out of straw (e.g. mattresses), ceramics, making brooms, sewing and so forth.

Educational Interventions

There are a number of educational service providers for mentally impaired individuals, probably because this was one of the initial areas of disability to receive attention. Of major importance is the program at the Fernando Centeno-Güell school in San José, which serves over 265 individuals between the ages of one and 18. Like most organizations in this area, it is supported through the Ministry of Education, and the referral and admission process is much the same as those described in the beginning of this paper. Other programs may be found in the larger population areas in the various provinces (for more detailed information, see chart on service providers, Appendix C).

Most educational programs for the mentally impaired emphasize attention at the preschool level, practical training for those severely impaired, training in the basic skills (math, reading, language), and prevocational training.

In the area of emotional impairment, however, there exist few service organizations focused specifically on this disability, although many programs emphasizing other disabilities include people with emotional impairment. Two public schools offer services in the educational area. The Escuela Neurosiquiátrica in San José and the program at the Escuela de Enseñanza Especial in

Puntarenas. The Escuela Neurosiquiatrica provides services to approximately 110 people from 4-16 years of age. Approximately six teachers are in charge of the educational instruction.

Both of these educational institutions are financed by the Ministry of Education as well as by contributions from voluntary organizations and individuals.

In addition to these, the privately funded Instituto Nacional de Reeducacion "Celedonio Castenedo" (INRED) serves a population of males, 12 to 30 years old, who are mentally retarded or severely emotionally impaired. The institute, founded in Cartago in 1973, accepts up to 30 clients, half from Costa Rica and half from other countries of Latin America.

Vocational Interventions

In this area, like most of the other disability areas, the major resources for vocational training of the mentally and emotionally impaired come from the IRP, INA, and the Department of Rehabilitation of the Ministry of Work. These were discussed earlier.

Learning Disabilities

Medical Interventions

Learning disabilities is one of the more recent areas of disability to receive public attention. Any of the hospitals that provide diagnostic services for children with learning disabilities are usually involved in providing any necessary medical treatment.

Educational Interventions

Most of the programs in education for learning disabled children, offered to the public free of charge, are found in the public school system in the form

of resource rooms.

Two of the hopsitals, the Children's National Hospital and the Hospital Mexico, provide services for these children who are hospitalized for a period of time. These programs are usually financially supported by the administrative system of each hospital. The population attended varies. Often these programs will serve children who may need educational attention without their having to be hospitalized.

A number of private clinics have opened in the last ten years to serve children with learning disabilities. These, as one might expect, are self-supporting.

Vocational Interventions

There are no vocational centers serving the population that presents learning disabilities. This is because these individuals remain through their schooling years within the regular educational system, while receiving additional medical and/or educational help at health clinics and resource rooms. They use the regular vocational services that the society offers to all the citizens of the country at the time of making their career decisions.

Appendices

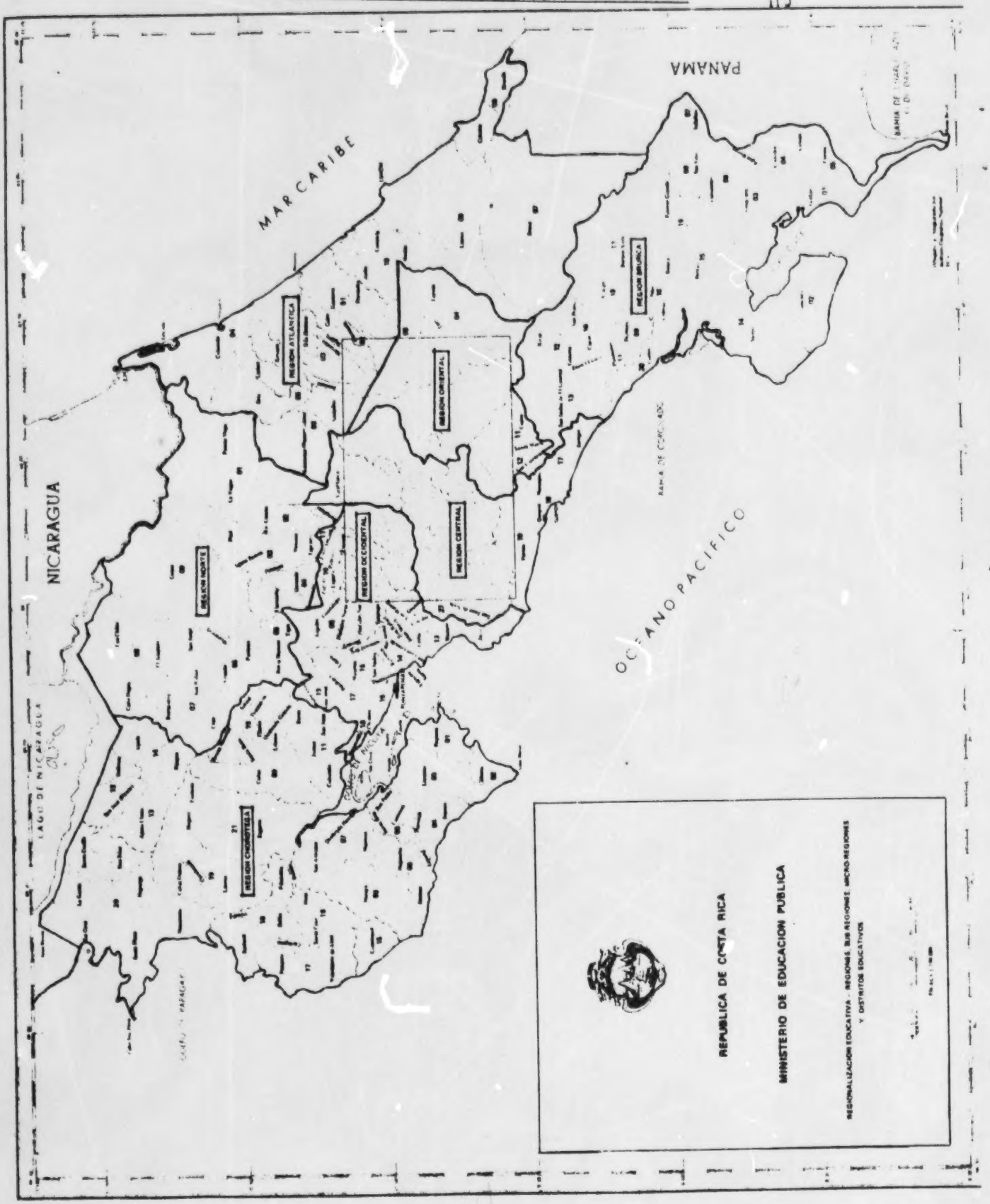
Appendix A

Map of Educational Regions in Costa Rica

Projected Registration of Special Education Students for 1980 by Educational Regions & Subregions, Resource Classroom, and Type of Disability

Appendix A

Map of Educational Regions in Costa Rica



Projected Registration of Special Education Students for 1980 by Educational Regions and Subregions, Resource Classrooms, and Types of Disability

Region	Sub-Region	Total*	Sub-Tot.* Resource Classrooms	Sub-Tot. General	Type of Disability*										
					Mentally Retarded			Speech & Hearing			Visually Impaired	Physical Disability	Health Problems	Psycho-Social Problems	Behavioral Problems
					Sub-Tot.	Self-Contained Classrooms	Special Ed. School	Sub. Tot.	Self-Contained Classrooms	Special Ed. School					
COSTA RICA		4,821	350	4,471	2,163	1,232	931	905	434	471	125	140	663	357	118
CENTRAL		3,081	225	2,856	1,120	728	392	440	266	174	125	140	663	250	118
	San José	2,626	150	2,476	843	532	311	412	238	174	125	140	663	175	118
	Heredia	413	75	338	249	168	81	14	14	-	-	-	-	75	-
	Puriscal	42	-	42	28	28	-	14	14	-	-	-	-	-	-
ORIENTAL		530	-	530	272	140	132	151	28	123	-			107	-
	Turrialba	78	-	78	28	28	-	50	-	50	-	-	-	-	-
	Cartago	452	-	452	244	112	132	101	28	73	-			107	-
OCCIDENTAL		528	25	503	363	98	265	140	56	84	-	-	-	-	-
	Alajuela	308	25	283	207	70	137	76	28	84	-	-	-	-	-
	San Ramón	85	-	85	49	-	49	36	-	36	-	-	-	-	-
	Puntarenas	135	-	135	107	28	79	28	28	-	-	-	-	-	-
CHOROTEGA		276	50	226	153	126	27	73	42	31	-	-	-	-	-
	Nicoya	106	50	56	42	42	-	14	14	-	-	-	-	-	-
	Cañas	28	-	28	14	14	-	14	14	-	-	-	-	-	-
	Santa Cruz	84	-	84	70	70	-	14	14	-	-	-	-	-	-
	Liberia	58	-	58	27	-	27	31	-	31	-	-	-	-	-
BRUNCA		151	-	151	113	70	43	38	-	38	-	-	-	-	-
	Cota	28	-	28	28	28	-	-	-	-	-	-	-	-	-
	San Isidro Gral.	123	-	123	85	42	43	38		38	-	-	-	-	-
	Buenos Aires	-	-	-	-	-	-	38	-	38	-	-	-	-	-
ATLANTICA		84	-	84	42	42	-	42	42	-	-	-	-	-	-
	Guápiles	14	-	14	14	14	-	-	-	-	-	-	-	-	-
	Limón	70	-	70	28	28	-	42	42	-	-	-	-	-	-
NOTRE		171	50	121	100	28	72	21	-	21	-	-	-	-	-
	San Carlos	171	50	121	100	28	72	21	-	21	-	-	-	-	-

*Figures = number of children served in each category.

Appendix B

Addresses of Main Rehabilitation and Special Education Institutions in Costa Rica

Government Institutions

Consejo Nacional de Rehabilitación y
Educación Especial
Apartado 7-2170
San José, Costa Rica

Departamento de Educación Especial
Ministerio de Educación Publica
San José, Costa Rica

International Programs

Oficina Del Convenio Internacional de
Rehabilitacion (OCIR)
Centro de Docencia e Investigacion
CCSS - Aptdo. 10105
San José, Costa Rica

PATH - C.R.
Departamento de Educación Especial
Ministerio de Educación
San José, Costa Rica

University Programs

Escuela de Orientación y Educación Especial
Facultad de Education
Universidad de Costa Rica
Cuidad Universitaria Rodrigo Facio
San José, Costa Rica

Escuela de Educación
Universidad Nacional
Heredia, Costa Rica

Appendix C

Centers Providing Services for the Physically and Mentally Disabled

Appendix C

Centers Providing Services for the Physically and Mentally Disabled

Medical Rehabilitation Institutions

Service Providers	Age served*	Visual impairments	Speech & hearing impairments	Neuromuscular impediments	Prosthesis & orthosis services	Mental impairments	Emotional & mental illness	Learning disabilities
Centro Nacional de Rehabilitación Dr. Humberto Araya Rojas Address: Costado sur del Hospital Mexico, La Uruca, San José	aas			X	X			
Servicio de Fisioterapia del Hospital San Juan de Dios Address: Costado sur del Hospital San Juan de Dios, entrada de la Morgue San José	aas			X	X			
Hospital Nacional Psiquiátrico Address: Pavas, San José	aas					X	X	
Clínica de Labio y Paladar Hendido Address: Hospital Nacional de Niños 1º y 4º piso, San José	18 and below		X					
Unidad de Oftalmología Sanitaria Address: Edificio del Ministerio de Salud, San José	aas	X						
Centro Nacional de Detección de la Sordera Address: 110 mts. Oeste de la Clínica Bíblica 2º piso, Edificio Roque Cozza, Oficina Nº2 San José	aas		X					
Casa de Salud Address: De la Farmacia del Hospital San Juan de Dios, 200 mts. Norte San José	above 13							
Hogar de Rehabilitación de Santa Ana Address: Pozos de Santa Ana, Apartado 5088 San José	0-14			X	X	X		
Clínica de Psicoterapia y Centro de Estimulación Precoz Address: 100 mts. al sur y 200 mts. al este de la Iglesia de San Pedro, San José	aas		X			X	X	X

*All ages served (aas)

Special Education Institutions

Service Providers	Age served	Visual impairments	Speech & hearing impairments	Neuromuscular impediments	Prosthesis & orthosis services	Mental impairments	Emotional & mental illness	Learning disabilities
Centro Nacional de Educación Especial Fernando Centeno Güell Address: Guadalupe, San José	0-18	X	X			X		
Departamento de Retardo Mental del Centro Fernando Centeno Güell Address: Guadalupe, San José	0-18					X		
Departamento de Audicion y Lenguaje del Centro Fernando Centeno Güell Address: Guadalupe, San José	0-15		X					
Departamento de Defectivos Visuales del Centro Fernando Centeno Güell Address: Guadalupe, San José	0-18	X						
Instituto Andrea Jiménez Address: 100 mts. Norte y 300 mts. Oeste de la Iglesia Santa Teresita, B° Aranjuez San José	10-20					X		
Escuela Neuro-Psiquiátrica Infantil Address: Barrio la Pitahaya, 100 mts. Norte y 50 mts. Oeste de Pollos, Kentucky, Paseo Colon, San José	4-16						X	
Escuela de Rehabilitación Address: 275 mts. al Norte del Hospital Nacional de Niños, Calle 2° Apartado 781, San José	0-18			X				
Escuela del Hospital Nacional de Niños Address: Hospital Nacional de Ninos, 5to piso San José	0-13							X
Escuela Especial de Pediatría Hospital México Address: Hospital México, 7° piso, Cirugía Infontil San José	0-13							X
Hogar de Rehabilitación de Santa Ana Address: Pozos de Santa Ana San José	0-14			X	X	X		
Escuela de Enseñanza Especial de Heredia Address: San Rafael de Heredia Heredia	7-19					X		
Centro de Enseñanza Especial de Audición y Lenguaje de Turrialba Address: Ciudadela Clorito Picado, Turrialba	0-16		X					
Escuela de Educación Especial de Retardo Mental de Cartago Address: San Rafael de Oreamuno, Cartago	0-20					X		
Escuela de Niños Sordos de Cartago Address: Barrio el Carmen de Cartago	0-16		X					
Escuela de Enseñanza Especial Marta Saborío f. Address: El Llano, Alajuela	0-16		X			X		
Escuela de Enseñanza Especial de Grecia Address: Grecia, Alajuela	-		X			X		
Escuela de Enseñanza Especial de Puntarenas Address: El Roble, Puntarenas	0-14					X	X	
Escuela de Enseñanza Especial de Santa Cruz Address: Santa Cruz, Guanacaste	-		X			X		

Special Education Institutions (Cont'd.)

Service Providers	Age served	Visual impairments	Speech & hearing impairments	Neuromuscular impediments	Prosthesis & orthosis services	Mental impairments	Emotional & mental illness	Learning disabilities
Escuela de Enseñanza Especial de Liberia Address: Barrio Moracio Liberia, Guanacaste	0-18		X			X		
Escuela de Enseñanza Especial de Pérez Zeledón Address: San Isidro del General San José	0-16		X			X		
Escuela de Enseñanza Especial de San Carlos Address: Ciudad Quesada San Carlos, Alajuela	0-16		X			X		
Centro para el Niño Excepcional Address: Del Hospital Nacional de Niños, 100 mts. oeste y 50 mts. sur Centro Médico Santa Mónica San José	0-18					X	X	X
Instituto Nacional de Reeducación "Celedonio Castanedo" Address: Cuesta la Chinchilla San Rafael de Oreamuno, Cartago	12-30		X			X	X	X
Clínica Correctiva del Aprendizaje Address: 50 mts. norte Mercado de Mayoreo, San José	5-17							X
Clínica San Rafael Address: 200 mts. norte, 25 mts. este, entrada principal del Hospital Nacional de Niños San José	0-18							X

Vocational Rehabilitation Institutions

Service Providers	Age served	Visual impairments	Speech & hearing impairments	Neuromuscular impediments	Prosthesis & orthosis services	Mental impairments	Emotional & mental illness	Learning disabilities
Instituto de Rehabilitación Profesional (IRP) Address: Carretera San José, Heredia San José	16-45	X	X	X		X	X	X
Instituto Nacional de Aprendizaje Address: Oficina de Asignaciones familiares, INA La Uruca, San José	16 and over	X	X	X		X	X	
Departamento de Rehabilitación Profesional del Ministerio de Trabajo Address: 5to piso, Avenida Central, Calle 6 Edificio Raventos, San José	-	X	X	X		X	X	X
Beneficio Río Negro S.A. Address: 300 mts. sur de la farmacia Modelo, San Pedro de Montes de Oca, San José	18 and over		X					
Taller Protegido de Acopane Address: Sección de Retardo Mental, Centro Nacional de Educación Especial "Fernando Centeno Güell" Guadalupe, San José	18 and over					X		
Taller Protegido de Alajuela Address: Contiguo a la Comandancia de Alajuela	18 and over					X	X	

Appendix D

Associations for the Disabled

Patronato Nacional de Rehabilitación

Constituted through the goodwill of many individuals. Responsible for all major decisions pertaining to the operation and funding of the Hogar de Rehabilitación de Santa Ana.

Asociación Industrias de Buena Voluntad

Constituted by individuals concerned with the availability of comprehensive rehabilitative services for the disabled. Its main task is to procure the integration of the physically and mentally handicapped in the field of work. Activities are channeled through the Instituto de Rehabilitación Profesional.

Patronato Nacional de Ciegos

A semi-autonomous association having on its board representatives from the Ministries of Work, of Health, of Education, the Medical Association and from the University of Costa Rica. Its efforts are directed to blind adolescents and adults.

Asociación Costarricense de Ciegos Hellen Keller

Initially founded by seeing and non-seeing individuals with the purpose of assisting blind adults in general, and enhancing legislation to protect them. The directive board is made up of 7 members and channels its efforts through the Instituto de Rehabilitación para Ciegos Hellen Keller.

Asociación Silenciosa de Costa Rica

Made up of deaf individuals only. It began as a sports association for the

deaf but later extended its activities to cultural and educational areas as well. At present, plans are to become involved with other Central American countries.

Asociación de Padres de Niños Sordos de Costa Rica

An association begun by parents geared to assisting deaf children and adolescents. Provides some orientation to parents of the deaf as well as organizes campaigns relative to problems, such as language development.

Asociación Mima Bravo

Made up of the deaf, parents of the deaf, professionals, and other concerned individuals. Dedicates its work to problems relative to the deaf. Specific attention has been given to the utilization of total communication as a useful technique.

Fundacion de Ayuda al Niño Sordo (FANS)

Formed by parents of the deaf and people of good will in general. Particular attention is given to the oral method of communication. Affiliated with FANS of Argentina.

Fundación Rosa Azul

Initiated by parents with exceptional children. Much effort is geared to increasing awareness in the community through appropriate campaigns focusing on the need to respect and become more knowledgeable about the handicapped person.

Asociación Costarricense de Padres del Niño Excepcional (ACOPANE)

Established by the parents of retarded children. Assists in the

development of programs that aid special education. At this time, much emphasis is being directed to developing sheltered workshops.

Fundación Andrea Jiménez

Begun by parents of mentally impaired children and by other concerned individuals. Focuses attention on problems that affect this group of persons. It provides the financial support for the Instituto Andrea Jiménez.

Asociación de Padres de Niños con Parálisis Cerebral

Initiated by parents of children with cerebral palsy. Is involved with various problems that affect both the child and the family. One of its present projects is to secure a building in which more training may be advanced for this population.

Asociación Pro-enfermo Mental del Hospital Nacional Psiquiátrico

A female organization dedicated to the development of rehabilitation practices and recreation activities for psychiatric patients.

Asociación Bienestar y Salud del Menor Enfermo Mental

Founded in 1972 with the objective of overseeing those activities that may relate to the welfare of mental patients who are underage.

Asociación Costarricense de Lisiados

Formed by physically disabled individuals to achieve greater participation in activities leading to rehabilitation.